

Domestic Violence Petitioner/Respondent Information Sheet

DV _____

Note: The information in this form is confidential and will only be used by the Court and the Sheriff's Office in their efforts to serve the Respondent.

Petitioner Information:

Your Name: _____

Daytime Phone #: _____ **Cell Phone #:** _____

Respondent Information:

Respondent's Name: _____

Also Known As: _____

Sex: Male or Female _____ **Date of Birth:** _____

Race: _____ **Height :** _____ **Weight:** _____

Eyes: _____ **Hair:** _____

Scars/Tattoos: _____

Drive License # _____

Make /Model/Yr of Vehicle Driven _____

License Plate No.# _____

Respondent's Last Known: Street Address: _____

City: _____ **State:** _____ **Zip** _____

Daytime Phone#: _____ **Cell Phone#:** _____

Respondent's Employer's Name: _____

Employer's Address: _____

City: _____ **State:** _____ **Zip** _____

Phone #: _____

Normal Work Hours/Days: _____

Additional Comments: _____